BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

application or Docket Number

09/913902

		CLAIMS A	S FILED -	SMAL	SMALL ENTITY			OTHER THAN				
(Column 1) (Column 2)										OR	SMALL	
TOTAL CLAIMS							RA	ΓE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	430	OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			글글. minus 20=		· 13		X\$	9=	117	OR	X\$18=	
INDEPENDENT CLAIMS			, minus 3 =		*		X4)=	1 2 6	OR	X80=	
MU	JLTIPLE DEPEN	NDENT CLAIM P				+13	5~		1	+270=		
* If the difference in column 1 is less than zero, enter "					"0" in c	olumn 2	ТОТ		135 547	OR OR	TOTAL	
CLAIMS AS AMENDED - PART II							, , ,		6 (2.	l On		711001
(Column 1) (Column 2) (Column 3)							SMA	LLE	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$:)=		OR	X\$18=	1 55 55
	Independent	*	Minus	***		=	X40	=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+13	 5=		OR	+270=	
								TAL		ا	TOTAL	
								FEE		OR	ADDIT. FEE	.,
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												Ą.
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI; TIONAL FEE
	Total	*	Minus	**		=	X\$ 9)=		OR	X\$18=	
	Independent	NTATION OF MU	Minus	***	CI AINA	=	X40	=		OR	X80=	·
	TIMOTTALOC	INTATION OF MIC	DETIFIE DEF	CINDENT	CLAIM		+13	5=		OR	+270=	******
,								TAL FEE			TOTAL ADDIT. FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$ 9	_ :		OR	X\$18=	
	Independent	NTATION OF MI	Minus	***	CLAIL	=	X40	=		OR	X80=	
105										OR	+270=	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FE "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										I	TOTAL	
••••	f the "Highest Nur	mber Previously Pa ber Previously Paid	id For" IN THI	S SPACE is	s less thai	n 3. enter "3."		_			ADDIT. FEE! umn 1.	